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## APPLICANTS

Hong Wan, Plymouth, MN;

Ronald J. Jensen, Bloomington, MN;

Michael J. Bohlinger, Minnetonka, MN; Tamara K. Bratland, Plymouth, MN;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/527,368 12/04/2003 *OK HNW*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none HNW*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/20/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 10	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>HNW</i>				

## ADDRESS

000128  
HONEYWELL INTERNATIONAL INC.  
101 COLUMBIA ROAD  
P O BOX 2245  
MORRISTOWN , NJ  
07962-2245

## TITLE

Vertical die chip-on-board

FILING FEE  RECEIVED 968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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